PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS. This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of mantenance fees will be mailed to the current correspondence address; and included unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

08/23/2006

30542 FOLEY & LARDNER LLP

7590

P.O. BOX 80278 SAN DIEGO, CA 92138-0278 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Fransmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (771) 273-2885, on the date indicated below.

| (Depositor's name) | RACHEL CADUTO | |
|--------------------|-----------------|--|
| (Signature) | i aila Correcto | |
| (Date) | 11/21/06 | |
| | | |

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/730 790 12/05/2000 Mark H. Tuszynski 041673/2047

TITLE OF INVENTION: METHODS FOR MODULATION OF THE EFFECTS OF AGING ON THE PRIMATE BRAIN

| 1 | APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE | | | |
|---|---------------|--------------|--|---------------------|----------------------|------------------|------------|---|--|--|
| n | onprovisional | YES | \$700 | \$300 | \$0 | \$1000 | 11/24/2006 | _ | | |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | | | | |
| CHEN, SHIN LIN | | 1632 | 514-044000 | | | | | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CPR 1.535). Change of correspondence address (or Change of Correspondence Address from PTO/SB1122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB147, Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name ville perinted. | | era 2 | Lardner I | LP | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) | | | | | | | | | | |

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Regents of the University of California, Oakland, CA

Please check the appropriate assignee category or categories (will not be printed on the patent):

4a. The following fee(s) are submitted: X Issue Fee

Publication Fee (No small entity discount permitted) Advance Order - # of Copies ten (10)

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.

Payment by credit card. Form PTO-2038 is attached. XI The Director is hereby authorized to charge the required (ce(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0872 (enclose an extra copy of this form)

5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1 27.

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date 11-21-2006 34.842 Registration No.

Typed or printed name Stacy L./Taylor

This collection of information is required by 3 CFE 1.311. The information is required to obtain or results a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 54 USC 1.22 and 37 CFE 1.41 has collection is selfmented to acke 12 minutes to complete, including gathering, preparing, and the confidential to the complete including gathering, preparing, and the formation of the complete including gathering, preparing and the formation of the complete including gathering, preparing and the formation of the complete including gathering, preparing and the formation of the complete including gathering, preparing and the complete including gathering and gathering and gathering gath

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number